INSTRUCTIONS TO AUTHORS

I. General:
*Circulation Reports* is an official scientific journal of the Japanese Circulation Society. The journal will consider various types of original research articles, including studies conducted with human subjects and experimental models, as well as high-quality applied clinical, epidemiological, and healthcare policy papers related to cardiovascular and cerebrovascular diseases. Specific content areas of interest are: arrhythmia and electrophysiology, cardiovascular nursing, cardiovascular surgery, congenital heart disease, coronary heart disease, epidemiology, exercise physiology, genetics and translational biology, health services and outcomes research, heart failure, hypertension, imaging, interventional cardiology, molecular cardiology, nutrition, pediatric cardiology, pericardial disease, peripheral vascular disease, preventive cardiology, renal disease, resuscitation science, stroke, transplantation, valvular heart disease, vascular medicine, rehabilitation, obesity, metabolism, medical engineering, medical policy, medical economy and medical education. The journal will also consider the publication of review articles summarizing the present state of knowledge in a particular field, and manuscripts transferred from its sister journal, *Circulation Journal*. All manuscript types are listed in **IX. Manuscript Types**. Manuscripts must conform to *Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals* (ICMJE Recommendations) ([http://www.icmje.org/recommendations/](http://www.icmje.org/recommendations/)).

II. Previous Publication:
Submission of a manuscript to *Circulation Reports* implies that the article is original and that no portion (including figures or tables) is under consideration elsewhere or has been previously published in any form other than as an abstract. Previous publication includes publishing as a component of symposia, proceedings, transactions, books (or chapters), articles published by invitations or reports of any kind, as well as in electronic databases of a public nature.

III. Copyright / Permissions:
Submission of a manuscript implies that, when accepted for publication, the authors agree to automatic transfer of the copyright to the Japanese Circulation Society. Every reproduced figure or table must have permission from the copyright holder. Authors should obtain permission in advance of manuscript submission, and clearly state that in the figure/table legend.

Examples: (1) Adapted from reference no. xx with permission  

IV. Ethics:
When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional). The participants’ informed consent should be obtained and should be indicated in the text. When reporting experiments on animals, indicate whether institutional or national guidelines for the care and use of laboratory animals were followed.

V. Clinical Trials:
VI. Submission of Manuscripts:
All manuscripts must be submitted electronically through Circulation Reports’ online submission system (https://mc.manuscriptcentral.com/circrep). The submitting author should upload the manuscript files in appropriate file formats according to the instructions provided. After manuscript files are uploaded, the manuscript will undergo a conversion process. Before completing submission, the submitting author is required to thoroughly check the converted PDF file.

VII. Authorship Agreement:
Soon after submission through the online submission system, the contact/submitting author should complete the “Authorship Agreement” form with all co-authors’ signatures, and email/fax it to the Editorial Office (cr@j-circ.or.jp). Because any additional co-authors cannot be approved after the manuscript has been accepted, ensure that all co-authors have been properly listed during the submission process. If additional authors are included in a revised manuscript, the contact author of the manuscript is required to provide another “Authorship Agreement” form signed by the added authors as well as detailed reasons for their addition.

VIII. Manuscript Format:
All manuscripts should be written in English (US spelling) and prepared according to the following specifications.

1. The main document should be typewritten with double spacing, and include the following in general:
   (1) Title page
   (2) Abstract
   (3) Key words
   (4) Text
   (5) Acknowledgements
   (6) References
   (7) Legends for Tables and/or Figures

2. Pages should be numbered consecutively in this sequence, beginning with the title page.

3. The title page must have the following content:
   (1) Complete title of the paper; Abbreviations are not acceptable in the title.
   (2) Name(s) of author(s) with highest academic degree(s); Only MD, PhD, or BSc could be included.
   (3) Affiliations of all authors at the time of the study; i.e. department and institution
   (4) Short title; Up to 50 characters including spaces can be used.
   (5) Disclosures; Information of all COI, grants, sources of funding related to the manuscript should be declared.
   (6) Name and address of the author responsible for correspondence
   (7) Total word count of the manuscript
   (8) Total numbers of Tables, Figures and Supplementary files

4. Abstracts in manuscript types “Clinical Investigation”, “Experimental Investigation” and “Rapid Communication” should be structured, and consist of the following 3 headings:

<table>
<thead>
<tr>
<th>Headings</th>
<th>What to indicate under the heading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td>Rationale for study</td>
</tr>
<tr>
<td>Method and Results</td>
<td>Brief presentation of methods and presentation of significant results; Note that both categories should be included under the one heading.</td>
</tr>
<tr>
<td>Conclusions</td>
<td>Succinct statement of data interpretation</td>
</tr>
</tbody>
</table>

Some manuscript types require no abstract. Also refer to IX. Manuscript Types for details.
5. Units of measurement should be SI units, except for blood pressure, which should be expressed in mmHg. Do not spell out numbers and standard units of measurement except at the beginning of sentences. Use Arabic numerals and standard abbreviations to indicate numbers and units.

6. References must be numbered consecutively as they appear in the text, and be listed in the same numerical order at the end of the article. They should accord with the system used in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals. Only published manuscripts are accepted as references. If a reference is from a yet-to-be-published book, include ‘In Press’ as well as the anticipated year of publication. If a reference is published online only, the “D.O.I” or “URL as well as the last available date accessed” should be provided. The titles of referenced journals should be abbreviated to the style used in Index Medicus (http://www.nlm.nih.gov/tsd/serials/lji.html). All author names should be listed when referenced material has 6 or less authors; when it has 7 or more, only the first 6 authors’ names should be listed, with “et al.” at the end.


7. All figures in a manuscript are highly recommended to be in full color; publication in color is cost-free. Letters and symbols in figures should be clear and of sufficient size to be legible after reduction to the width of one column. Specify the size to be printed, if necessary.

8. Content of supplementary files will only be published in the online journal. Therefore, if a supplementary file contains References, they should be separate from those in the Main Document, and only refer to the content in the supplementary file(s). There is a size limit of 5 MB for uploaded supplementary file(s) per manuscript.

IX. Manuscript Types:

<table>
<thead>
<tr>
<th>Manuscript Types</th>
<th>Total word count</th>
<th>Abstract word count</th>
<th>No. of Tables (T)</th>
<th>Figures (F)</th>
<th>Supplementary Files (S)</th>
<th>No. of References</th>
<th>Other requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Investigation</td>
<td>≤ 6000</td>
<td>≤ 220</td>
<td>T: F: ≤ 8 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>3–5 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
<tr>
<td>Experimental Investigation</td>
<td>≤ 6000</td>
<td>≤ 220</td>
<td>T: F: ≤ 8 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>3–5 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
<tr>
<td>Rapid Communication</td>
<td>≤ 3000</td>
<td>≤ 100</td>
<td>T: F: ≤ 4 in total</td>
<td>≤ 20</td>
<td></td>
<td>3 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
</tbody>
</table>

“Rapid Communication” is a report of novel findings of particular importance and current interest and will be accepted if they merit immediate publication. The manuscripts will normally be published within 2 months of acceptance.
<table>
<thead>
<tr>
<th>Manuscript Types</th>
<th>Total word count</th>
<th>Abstract word count</th>
<th>No. of Tables (T)</th>
<th>Figures (F)</th>
<th>Supplementary Files (S)</th>
<th>No. of References</th>
<th>Other requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Report</td>
<td>≤ 4000</td>
<td>≤ 220</td>
<td>T/F: ≤ 4 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>3–5 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
<tr>
<td>Statement / Opinion</td>
<td>≤ 3000</td>
<td>≤ 220</td>
<td>T/F: ≤ 4 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>3–5 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
<tr>
<td>Protocol Paper</td>
<td>≤ 3000</td>
<td>≤ 220</td>
<td>T/F: ≤ 4 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>3–5 Keywords</td>
<td>Structured Abstract with 3 headings</td>
</tr>
<tr>
<td>Images in Cardiovascular Medicine</td>
<td>≤ 4000</td>
<td>N/A</td>
<td>T: N/A</td>
<td>F: ≤ 1</td>
<td>S: ≤ 2</td>
<td>≤ 3</td>
<td></td>
</tr>
<tr>
<td>Review Article (Invited)</td>
<td>≤ 6000</td>
<td>≤ 220</td>
<td>T/F: ≤ 8 in total</td>
<td>S: ≤ 3</td>
<td>No limitation</td>
<td>Upon request from the Editor-in-Chief</td>
<td>Unstructured Abstract</td>
</tr>
<tr>
<td>Editorial (Invited)</td>
<td>≤ 1500</td>
<td>N/A</td>
<td>T/F: ≤ 2</td>
<td></td>
<td></td>
<td>≤ 15</td>
<td>Upon request from the Editor-in-Chief</td>
</tr>
<tr>
<td>Case Report</td>
<td>Circulation Reports does not accept any Case Reports.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Specific content to fall under the manuscript type / Specific policies

- “Brief Report” presents complete highly significant findings reported in a shorter format.
- “Statement / Opinion” focuses on a topic about which the authors have personal thoughts, beliefs, or feelings.
- “Protocol Paper” reports planned or ongoing studies. Reports of work already carried out will not be considered as a Protocol Paper.
- “Images in Cardiovascular Medicine” should contain a novel color image with scientific impact. Note that we do not accept any case reports. The manuscript normally occupies 1 journal page.
- “Review Articles” manuscripts are usually invited ones, but we will also consider limited number of non-invited submissions.
- “Editorial” normally occupies no more than 2 journal pages.


(2) Authors who submit or resubmit manuscripts to the journal are required to have all of their manuscript files strictly reflect the requirements outlined here. When any part does not, we cannot start either the initial or revision review process.

(3) “Total word count” is the total number of all words appearing in the manuscript files, except for the text in Table(s) and Figure(s). Note that legends for these are included in the “Total word count”.

X. Conflict of Interest Disclosure Policy:

The submitting author should complete the online form in the submission system and have the same information included in “Disclosures” in the Main Document in order to disclose all authors’ relationships that could be perceived as real or apparent conflict(s) of interest. When submitting a manuscript for publication, all authors are required to disclose any financial relationship (within the past 12 months) with a biotechnology manufacturer, a pharmaceutical company, or other commercial entity that has been involved in the subject matter or materials discussed in the manuscript. When a manuscript has been accepted for publication, all disclosed COI will appear in the article.

Example: Disclosures

A (author name) serves as a consultant to Z (entity name); B’s spouse is chairman of Y; C received a research grant from X; D received lecture fees from V; E holds a patent on U; F has been reimbursed by T for attending several
conferences; G received honoraria for writing promotional material for S; H has no conflict of interest.

JCS has decided to follow recommendations of the World Medical Association and arrangements under the WHO Framework Convention on Tobacco Control (FCTC), and JCS journals will not publish research papers submitted or funded by tobacco companies (including subsidiaries) and tobacco research organizations such as the Smoking Research Foundation, in Japan and overseas.

XI. Review of Manuscripts:
All original manuscripts are usually evaluated by 2 reviewers assigned by the Editors.

XII. Proofs:
Galley proofs of accepted manuscripts will be sent to the authors for their correction. Changes should be limited to typographical errors or errors in the presentation of data. Excessive corrections may be rejected by editors and/or be charged to the authors.

XIII. Publication Charges:
*Circulation Reports* will issue an invoice of JPY150,000 per manuscript. If payment of any previously submitted manuscript cannot be confirmed by the Editorial Office, all authors of the manuscript will no longer be able to submit a new manuscript to *Circulation Reports*.

XIV. Offprints:
Offprints are available in a multiple of 100 copies when ordered with the return of the proofs. We may ask you for an application for our secondary use permission if you order more than 300 offprints. Contact the Editorial Office (cr@j-circ.or.jp) for further details.

(October 1, 2018)